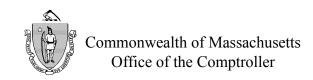
VENDOR INVOICE INPUT FORM

Trans VI	Dept	R/	Org	Numb	er	VI Date
Action: Entry(E) Modify(M)				TY	Vendor Invoi	ce Number



	Modify	r(M)													
Vendor Code						Fr	Freight:								
Vendor Name Vendor Address						Di	Discount Type Taxes								
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Clear All Comments					Т	Total Inv									
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Approved By: Title:															